

RESERVATION REQUEST FORM

(please print clearly and complete all information)

Today's Date: _____

Rental Code # _____ (office use)

Date requested: _____

Time: _____

General Information:

Main Contact Name: _____ (must be present at event/submit payment)

Member: YES or NO

Resident: YES or NO

Phone: (home) _____ (work) _____ (cell) _____

Address: _____
Street City Zip

Type of function: _____

Organization Name (if applicable): _____

Attendance: (approximate)

Number expected _____ Age range _____ Number expected for supervision _____

Packages: (please check one)

Please note: Packages not available during peak season (Jan. – Mar.)

(1) Splash N' Dash _____

Time in each area: Ball _____ Pool _____ Room _____

(2) Stay N' Play _____

Time in each area: Court _____ Pool _____ Room _____

(3) Kids Swim/Indoor Gym _____

Time in each are: Indoor Playground _____ Pool _____ Room _____

Equipment Request: (please check—additional charges may apply)

Tables _____ How many _____ VCR _____ Overhead _____ Chairs _____ How many _____ Screen _____

Lectern _____ Floor covering _____ (floor covering available for non-athletic functions located on gym floor)

Other (specify) _____

Personnel Requests: (set up and break down charges may apply)

Building Monitor/Attendant.....\$10.00 per person per hour

Lifeguard.....\$10.00 per person per hour

Room/Area Request per hour: (refer to per hour rental rates if not renting a Party Package)

Food/Alcohol

Food service is not provided. Kitchen facilities are available for rental fee. Users may bring their own food or contract independently with a Friendship Community Center approved caterer. Alcohol is not permitted.

The applicant acknowledges the he or she has read the Friendship Community Center Rental Policies and shall comply with its terms and conditions in the rental of space as requested in this application, if approved by the township.

Signature _____ Date _____

Printed Name: _____

Friendship Community Center Office Use Only

Approved (Kristen) _____ Approved (Lynn) _____ Denied _____ Reason _____

Contacted _____

Date/Time Change _____ Agreement sent _____ Total \$ amount _____ Calendar _____

Approved after appropriate change (Management) _____

Deposit returned _____
